POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*Mr*	*6764*	*5/3/w*
O.I.P.E. CLASSIFIER		*5?*	*58*
FORMALITY REVIEW	*BM*	*6024s*	*7-10-0*
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N .... Non-elected
=	.... Allowed	I .... Interference
—	(Through numeral)... Canceled	A .... Appeal
÷	.... Restricted	O .... Objected

Final	Original	8/29/03									
	①	✔									
	2	✓									
	3	✓									
	4	✓									
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Claims 51–100 (all blank), Claims 101–150 (all blank).

If more than 150 claims or 10 actions
staple additional sh et here

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